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FACSIMILE TRANSMISSION COVER SHEETDATE: June 9, 2004

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FROM: Randall K. McCarthy, Registration No. 39,297

TO: Mail Stop Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

ADDRESSEE/ORGANIZATION	FAX NO.	TELEPHONE NO.
Art Group 2651	703/872-9306	866/217-9197

RE: Application No. 10/000,257
In re application of: TeckKhoo Lim, et al.
Assignee: Seagate Technology LLC
Dkt. No.: P1543US01

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264318.1

TRANSMISSION BY FACSIMILE JUNE 9, 2004

PATENT
DKT. P1543US01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: TeckKhoon Lim, Myint Ngwe and KokHoe Chia
Assignee: SEAGATE TECHNOLOGY LLC
Application No.: 10/000,257 Group No.: 2651
Filed: November 2, 2001 Examiner: R. Colon
For: USER DATA WEDGE MEDIA CERTIFICATION APPARATUS AND METHOD

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2. Applicant is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being:

☐ facsimile transmitted to the Patent and Trademark Office, (703) 872 - 9306

Date: June 9, 2004

Diana C. Anderson
Signature

Diana C. Anderson
(type or print name of person certifying)

#264322

Amendment Transmittal--page 1 of 2

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY			
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE		
TOTAL	15	- 20	= 0	x \$ 18.00	= \$	0.00	
INDEP.	2	- 3	= 0	x \$ 86.00	= \$	0.00	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				+ \$ 0.00	= \$	0.00	
				TOTAL ADDIT. FEE	\$	0.00	

No additional fee for claims is required.

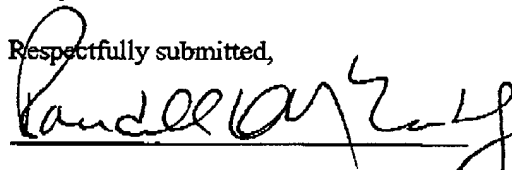
FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Account No. 06-0540.
If any additional fee for claims is required, charge Account No. 06-0540.

Date:

6/9/04

Respectfully submitted,



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